



Indiana Department of Environmental Management

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204

(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Michael R. Pence
Governor

Carol S. Comer
Commissioner

WATER WORKS OPERATOR CERTIFICATION (INDIANA) CONTINUING EDUCATION TRAINING COURSE APPROVAL NOTICE

66-34
Kelly Strain
AIRW
555 W. Jefferson St.
Franklin, IN 46131

PWST17-6005

CE Approval Number

January 4, 2017

Date Issued

Five (5) Technical

Contact Hours

You are hereby notified that the Drinking Water Branch, Office of Water Quality, has approved Five (5) technical contact hours for the "Basic GIS: Mapping and Saving Money" to be given on various dates in 2017. The Indiana drinking water approval number should be used by all individuals seeking Indiana drinking water continuing education credits for this course. Please insure that all fields marked as "required" on the credit report, including the date(s) or the date range(s) of attendance, are generated by your organization's attendance tracking methods.

In accordance with 327 IAC 8-12-7.6 (a)(b)(c):

All training providers must maintain records that include the following: the date of the training, the names of all individuals attending the training session, length of the session, the instructor's name, the course content, and the organization sponsoring the training. These records shall be maintained for a five (5) year period following the presentation of each training session. Training providers must submit a record of individuals attending courses within thirty (30) days of conclusion of the course on a form approved by the commissioner. These records shall be maintained for a five (5) year period. The form must contain at a minimum the following: name of course; name of individual attending course; hours of credit, and, date of course.

Any change in instructor or course presentation will require reevaluation.

Please complete the enclosed Continuing Education Credit Report Form for any Indiana drinking water operators requesting continuing education credit for this course. This form must be signed or initialed by the instructor/training provider. Submit these forms and a copy of the attendance roster to: **Indiana Department of Environmental Management, OWQ Drinking Water Branch, Mail Code 66-34 Attn: Jeremy Ferguson, 100 N. Senate Avenue, Indianapolis, Indiana 46204-2251** within thirty (30) days of completion of the approved course.

Handwritten signature and date 1/4/17



A State that Works

Please Reduce, Reuse, Recycle

If you wish to challenge this action, you must file a Petition for Administrative Review with the Office of Environmental Adjudication (OEA), and serve a copy of the petition upon IDEM. The requirements for filing a Petition for Administrative Review are found in IC 4-21.5-3-7 and 315 IAC 1-3-2. A summary of the requirements of these laws is provided below.

A Petition for Administrative Review must be filed with the Office of Environmental Adjudication (OEA) within fifteen (15) days of the issuance this notice (eighteen (18) days if you received this notice by U.S. Mail), and a copy must be served upon IDEM. Addresses are:

Director
Office of Environmental Adjudication
Indiana Government Center North
Room 501
100 North Senate Avenue
Indianapolis, Indiana 46204

Commissioner
Indiana Department of Environmental Management
Indiana Government Center North
Room 1301
100 North Senate Avenue
Indianapolis, Indiana 46204

The petition must contain the following information:

1. The name, address and telephone number of each petitioner.
2. An identification of each petitioner's interest in the subject of the petition.
3. A statement of facts demonstrating that each petitioner is:
 - a. a person to whom the order is directed;
 - b. aggrieved or adversely affected by the determination; or
 - c. entitled to administrative review under any law.
4. The reasons for the request for administrative review.
5. The particular legal issues proposed for review.
6. The facts, terms or conditions of the action for which the petitioner requests review.
7. The identity of any persons represented by the petitioner.
8. The identity of the person against whom administrative review is sought.
9. A copy of the action that is the basis of the petition.
10. A statement identifying petitioner's attorney or other representative, if any.

Failure to meet the requirements of the law with respect to a Petition for Administrative Review may result in a waiver of your right to seek administrative review. Examples are:

1. Failure to file a Petition by the applicable deadline;
2. Failure to serve a copy of the Petition upon IDEM when it is filed; or
3. Failure to include the information required by law.

If you seek to have an action stayed during the administrative review, you may need to file a Petition for a Stay of Effectiveness. The specific requirements for such a Petition can be found in 315 IAC 1-3-2 and 315 IAC 1-3-2.1.

Kelly Strain
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Pursuant to IC 4-21.5-3-17, OEA will provide all parties with notice of any pre-hearing conferences, preliminary hearings, hearings, stays, or orders disposing of the review of this action. If you are entitled to notice under IC 4-21.5-3-5(b) and would like to obtain notices of any pre-hearing conferences, preliminary hearings, hearings, stays, or orders disposing of the review of this action without intervening in the proceeding you must submit a written request to OEA at the address above.

If you have procedural or scheduling questions regarding your Petition for Administrative Review you may contact the Office of Environmental Adjudication at (317) 232-0850 or see OEA's website at <http://www.in.gov/oea>.

If you have any questions, please do not hesitate to contact **Mr. Jeremy Ferguson** of my staff, at **317/234-7427**.

Sincerely,

A handwritten signature in cursive script, appearing to read "Liz Melvin".

Liz Melvin, Section Chief
Capacity Development, Operator
Certification, & Permits Section
Drinking Water Branch
Office of Water Quality

LM/JF
Enclosure



PUBLIC WATER SUPPLY DRINKING WATER OPERATOR CONTINUING EDUCATION CREDIT REPORT

State Form 45674 (R / 08-2005)
Pending Approval by State Board of Accounts
327 IAC 8-12-7.6 Edition 2003
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
DRINKING WATER BRANCH

To ensure proper credit, the
Indiana Drinking Water approval
number **MUST** be submitted on the
form.

Indiana Drinking Water Approval Number

PWST17-6005

Maximum Credit Hours

Five (5) Technical

Mail
to:

Indiana Department of Environmental Management
OWQ Drinking Water Branch - Mail Code 66-34
100 N. Senate Avenue
Indianapolis, IN 46204-2251

INSTRUCTIONS: To ensure proper credit, print legibly

This form must be completed in order for the attendee to get credit. Be sure to record the certification number and class/grade for each certification for which you are requesting credit.

Mail the original form to IDEM at the above address. The Training Provider must retain a copy of the completed form for their records in accordance with 327 IAC 8-12-7.6.

Since this is a form of attendance verification, it is requested that this form be distributed during the latter portion of the training session. No credit will be considered when original signatures are not shown.

Name of certified operator		Mailing address (number and street):	
City:	State:	ZIP code:	Work telephone number: ()
<input type="checkbox"/> Check here if this is a change of address.			Home telephone number: ()

Title of training course:	Basic GIS: Mapping and Saving Money
Name of organization offering the course	AIRW
Number of contact hours approved for the course	Five (5) Technical

CREDIT APPLIED TO DRINKING WATER:

Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:
Operator certification number:	Class/Grade:	Expiration Date:

Date Attended: (Required)	Location attended:
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Number of contact hours attended and verified: (Required)
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Signature of instructor or training provider: (Required)

Signature of drinking water operator: (Required)



APPLICATION FOR APPROVAL OF TRAINING FOR CONTINUING EDUCATION - DRINKING WATER

State Form 45675 (R2 / 4-07)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
DRINKING WATER BRANCH
327 IAC 8-12-7.1(a) (b)

Instructions

This application must be completed for all drinking water training courses for which continuing education credits will be given. The notice of application approval and the IDEM approval number must be obtained before continuing education contact hours are given. Any change in instructor or course presentation will require reevaluation. Providers of approved training must comply with requirements of 327 IAC 8-12-7.1 (a) and (b).

FOR OFFICE USE ONLY

Indiana Drinking Water Approval Number

PWST17-6005

Maximum Credit Hours

5

Mail completed application to:
Indiana Department of Environmental
Management OWQ Drinking Water Branch -Mail
Code 66-34
100 N. Senate Avenue
Indianapolis, IN 46204-2251

Name of training course	
Basic GIS: Mapping and Saving Money	
Name of organization offering the course	
Alliance of Indiana Rural Water	
Address (number and street, city, state, and ZIP code)	
555 W Jefferson Street, Franklin, IN 46131	
Course instructor(s) [indicate whether certified operator(s)]	Instructor Name(s)
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Sherri Winters
Address (number and street, city, state, and ZIP code)	
See above	
Occupation (attach resume or biography)	
Water Programs Director, Alliance of Indiana Rural Water	
Name of standby instructor	Address (number and street, city, state, and ZIP code)
Rex Blanton	same
Number of Contact Hours for this course (a contact hour is defined as a sixty minute participation in an approved classroom program or sixty minutes of participation in an approved program not requiring classroom participation):	
5	
Method of attendance monitoring and verification (be specific or attach samples)	
Sign in sheet	
Cost of course	\$15/member; \$30/nonmember processing fees
Course Content: Attach an outline or narrative, brochure, agenda, workbook, etc. Include samples or description of any visual aids and handouts. Include amount of time spent on each topic. (Application cannot be evaluated without this.)	
Basics on how GIS mapping works and how it can save manhours in the future	
Date(s) course will be presented (month, day, year)	
6/7/2017; 10/4/2017; 11/8/2017	
Location(s) course will be presented	
New Palestine; Linton; Butler	
Name of Training Provider Contact Person	Telephone Number
Sherri Winters or Kelly Strain	317-789-4200
Address (number and street, city, state, and ZIP code)	

Send a copy of the course approval notification letter to the following individual(s)

Name
Kelly Strain
Address (number and street, city, state, and ZIP code)
555 W Jefferson Street Franklin, IN 46131
Name
Address (number and street, city, state, and ZIP code)

RECEIVED

DEC 27 2016

IDEM/OWQ
DRINKING WATER BRANCH

AGENDA

BASIC GIS: MAPPING AND SAVING MONEY

VARIOUS LOCATIONS (June-Nov. 2017)

9:00-9:30

Introductions

9:30-11:30

Discussion and assessment of what systems use today for mapping

Review/sample paper maps: are 'as-builts' available?, have original planning maps been updated?

Inconvenience of using paper maps

11:30-12:30

Lunch

12:30-2:30

Basic understanding of collecting GPS points/field verification

Usefulness of data to input into less expensive mapping systems: Google, smartphones, etc.

Software options: many more options, less expensive, etc.

Savings in manhours when attempting to locate infrastructure i.e. valves, manholes, meters, etc.

2:30-3:00

Wrap up discussion, Q&A

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DRINKING WATER BRANCH**

Sherri Winters

Sherri Winters is the Water Programs Director for Alliance of Indiana Rural Water where she is responsible for overseeing several projects, including training for drinking water and assisting with Wellhead Protection Phase II projects, onsite technical assistance and community septic system assistance.

Sherri had previously worked for the Alliance for over 10 years (March 1997-November 2007) but left the organization due to lack of funding. She then went to work for IDEM's Drinking Water Branch for six years (April 2008-May 2014) where she served as an Inspector, Security and Counter-Terrorism Coordinator and eventually the Section Chief for Construction Permits, Operator Certification and Capacity Development. She returned to the Alliance in May 2014.

She also has experience in septic system inspections and water well drilling inspections as an Inspector and Field Supervisor at the Marion County Health Department. (1981-1997)

Sherri holds a Bachelor of Science degree in Education from Ball State University (1980).

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DEC 27 2016

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